

A CASE STUDY OF SEVERE CHILDHOOD ABUSE:

The Impacts of Abuse, Effective
Treatment & Effectuating
Trauma-Informed Change

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INTRODUCTION

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Road Map:

- Judicial Disclaimer
- Secondary Trauma & Self-Care
- The Impacts of Abuse
- A Case Study of Childhood Abuse
- A Pathway to Resilience for CCJJ

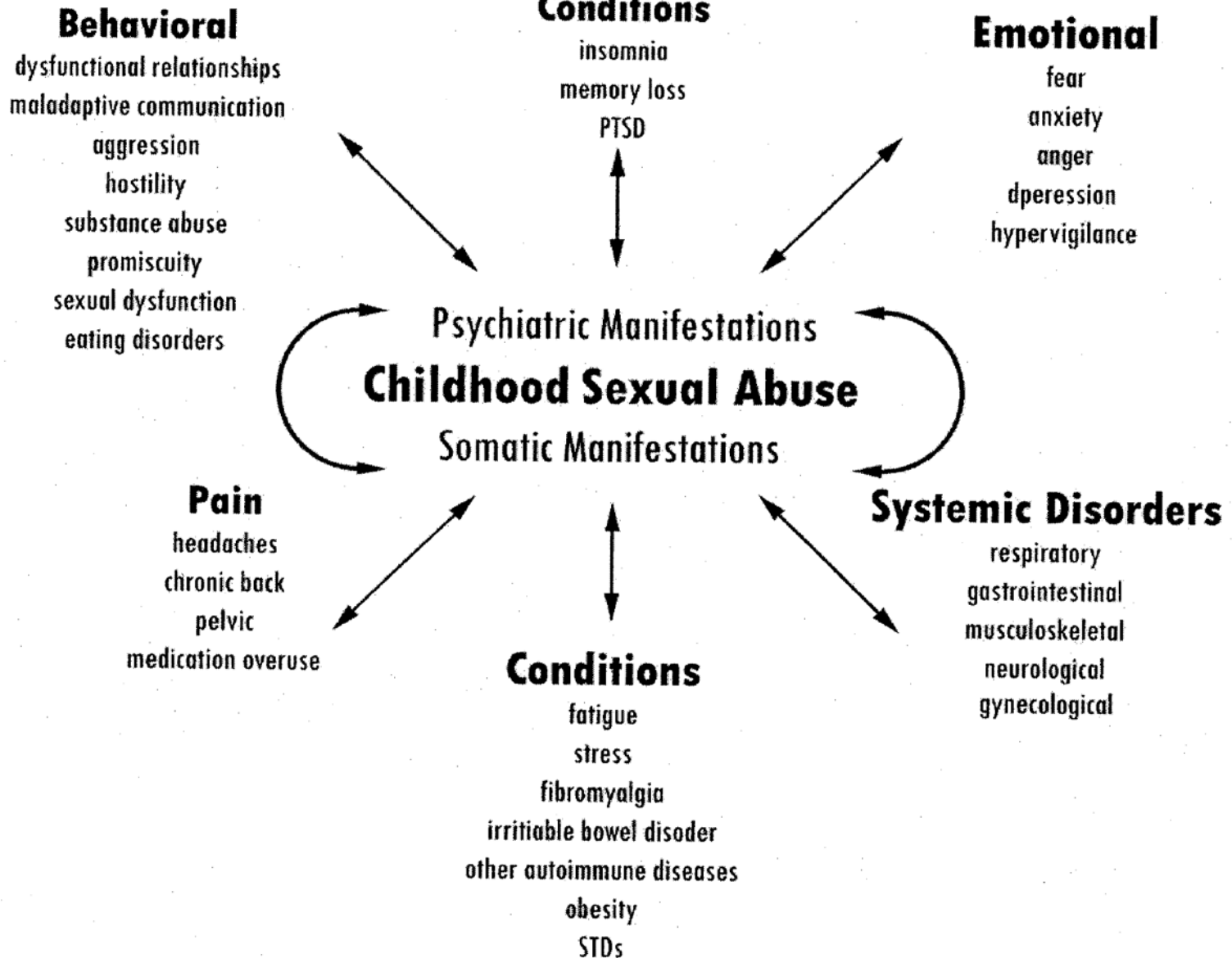
INCOMING WARNING!!!

- JUDICIAL DISCLAIMER!
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SELF CARE FIRST!

- Discussion of explicit information of severe child abuse including but not limited to physical and sexual abuse
- Secondary trauma: sudden, distressing emotions, intrusive imagery, mental and emotional fatigue.
- Your first care should always be self-care. Practice self-care exercises to learn "grounding" techniques.

THE IMPACTS OF ABUSE/TRAUMA:



PHYSIOLOGICAL IMPACTS OF CHILDHOOD ABUSE

- Physical Injuries: Title 18 and Title 19 each describe in detail physical injuries to a child to include regards the health or welfare of a child.
- Under the ACES there was a **significant increase in risk** to suffer the following in relation to an increase in ACE score: Chronic obstructive pulmonary disease (COPD), Ischemic heart disease (IHD), liver disease and many other medical, psychological and social problems.

NEUROLOGICAL IMPACTS OF CHILDHOOD ABUSE/TRAUMA

"Early Life Stress" Effects Brain Development

- Significant clinical research reflects that the brains of children subjected to chronic or complex abuse are modified by the trauma and may be biologically predisposed to develop emotional and psychological problems as adults as regarded in the ACES Study.
- If you withhold something during brain development, for instance, verbal or physical stimuli, it weakens the infant's brain related to verbal, auditory, attachment abilities. If you overload something during brain development, it also changes the function of neurotransmitters and hormones in the brain. Actual physical brain changes

"Fight, Flight or Freeze": Danger Response

- The HPA (Hypothalamus-Pituitary-Adrenal gland) axis responds to danger depending on the level of the perceived danger. The HPA is activated by CRF (Corticotrophin Releasing Factor).
- HPA Response: Increase heart rate, increase oxygen to the brain, widen pupils, blood from organs to skeletal muscles, reduce appetite, release glucose (energy/attention).
- "Regular" Stress Perception & Response (Sidewalk)
 - Stress perception: Danger level determination
 - Danger Level 1 = Low level response (Mild Alert)
 - Danger Level 5 = Middle level response (Alerted state)
 - Danger Level 10 = MAXIMUM RESPONSE (RED ALERT)

"Fight, Flight or Freeze": Danger Response (cont.)

- "Irregular" Stress Response: The stress response system of a child subjected to complex or chronic abuse may be triggered to the maximum response for life to all triggers all the time. (Animal and human scientific studies)
- Chronic or Complex Trauma-Infused Brain Response:
 - Danger Level 1 = MAXIMUM RESPONSE
 - Danger Level 5 = MAXIMUM RESPONSE
 - Danger Level 10 = MAXIMUM RESPONSE
- High dosage of corticotrophins reduces the size of the hypothalamus (impacts memory & correlates to mood disorders, PTSD, anxiety disorders)

PSYCHOLOGICAL IMPACTS OF CHILDHOOD ABUSE AND TRAUMA

- Several evidence-based studies "linked" abuse and trauma to psychological issues such as panic disorders, dissociative disorders, attention-deficit/hyperactivity disorders, eating and sleeping disorders, posttraumatic stress disorder, depression and reactive attachment disorders.
- Body Memories: A body memory generally involves physically re-experiencing the prior abuse in present time and therefore can often be very unsettling and disturbing in the moment. Flashbacks (similar to body memories) are essentially the victim visually reliving a prior abuse experience in a psychosomatic manner. Body memories may accompany flashbacks and intensify the reliving of the abuse.

SOCIOLOGICAL IMPACTS OF CHILDHOOD ABUSE & TRAUMA

- Abused adolescents are 3x more likely to use drugs and 3x more like to commit juvenile offenses.
- Abused teens and adults are 4x more likely to experience serious mental health problems such as severe anxiety disorders and depression.
- Abused teenagers are 6x more likely to attempt suicide multiple times (statistic varies between genders).
- Complex trauma more than doubles (increased from 20% to 50%) the likelihood of school problems and emotional difficulties.

NATIONAL STUDIES

- National Child Abuse and Neglect Data System (NCANDS)
- National Survey of Child and Adolescent Well-Being (NSCAW II)
- Adverse Childhood Experiences Survey (ACES).

Grounding by Olfactory Stimuli:

SCENTS MAKE SENSE, THE LESS
FILTERS THE BETTER!

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Pathways to Recovery and Resiliency: Victims becoming Survivors; Survivors becoming Thrivers

- Research and strong scientific evidence have established the effectiveness of certain therapies to lessen the impact of abuse and trauma:
 - Cognitive Behavioral Therapy (CBT)
 - Dialectical Behavioral Therapy (DBT)
 - Medication with Interpersonal Therapy
 - Eye Movement Desensitization and Reprocessing (EMDR)
(See Neural Signature of EMDR research)
- Studies also indicate that the brain is able to develop new neuronal pathways with proper treatment or training.

Pathways to Resilience for CCJJ

- Committees or Subcommittees to:
 - Review Restitution Law
 - 18-1.3-601 et al, 16-18.5-104 et al,
 - VBR, VC, VA
 - 24-4.1-101 et al, 24-4.2-101 et al
 - Justice-focused should be Human-focused
 - Wrap-around services – Victims-Survivors

Victims today could be your
colleagues tomorrow if you
endeavor to effectuate trauma-
informed policies and laws.

Thank You

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